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April 28, 2005

An Open Letter To the Citizens of the Upper Keys:

Lately there have been numerous news articles and letters of opinion written regarding the function of the Upper Keys Health Care Taxing District (UKHCTD) and the role of its director.

I would like to take this opportunity to set the record straight.

Monroe County Ordinance No. 008-1988 established the UKHCTD to generate revenue for these specific purposes:

- Firstly, principal access to appropriate levels of transfer and of health care for trauma related injury;
- Secondly, improvement of facilities and services, by hospital service area, to relieve reliance upon out-of-District sources; and
- Thirdly, to meet varying conditions and degrees of health care services as may be required by the District beyond those enumerated above.

It is important to realize that the ordinance authorizing the creation of the health care taxing districts took place at a time when access to care for trauma patients was a very real problem in the state. Many would argue that there remains a health care crisis in Monroe County, and indeed the entire country. And to some extent, the burgeoning costs of providing intensive trauma treatment and rehabilitation to indigent persons remain a large part of that crisis. But gaining access to a trauma center directly from an emergency scene is no longer an issue except in terms of distances involved. In the intervening years, various statutes and administrative rules have been put in place that assures that any trauma patient in the state has access to a trauma center regardless of that patient's ability to pay for the care.

The Director of the UKHCTD is a civilian position charged with a number of job responsibilities surrounding the administration of the taxing district and its funds. In fact, the two essential job functions are:

- Managing and updating the current trauma system for the district; establishing and maintaining working relationships with pre-hospital providers, hospital administrative staff, trauma centers, and air transport services within and outside of Monroe County
- Performing utilization review and providing fiscal management for all trauma criteria patients

The UKHCTD continues to be a funding source to provide equipment to the local hospital and the district's pre-hospital care providers. It also remains as the payer of last resort for patients who are otherwise unable pay for their trauma care. It should be noted that during Fiscal Year 2004 the administrative cost for the operation of the UKHCTD was \$140,094 compared to \$45,835 paid out for trauma treatment and transport. That's an administrative cost-to-expense ratio of 75.348%. These administrative functions can be performed during a 40-hour week, Monday through Friday. The recent clarification that I provided regarding the duties of the UKHCTD director is in no way meant to affect the ability of the UKHCTD to disburse funds.

The UKHCTD is a taxing district, not a Florida licensed pre-hospital care provider. There is no emergent need for the director's presence on the scene of any traffic accident or other traumatic injury.

Chapter 64E-2.015 of the Florida Administrative Code requires that emergency medical technicians or paramedics of licensed EMS providers score potential trauma alert patients as to transport destinations, and further requires them to transport, *or cause to be transported*, trauma alert patients to the nearest state approved trauma center. This burden is borne by the licensed EMS providers who operate within the UKHCTD. The civilian director of the taxing district has no legal operational role in this effort.

All of the licensed providers operating within the district, Monroe County Fire Rescue, Islamorada Fire Rescue, Key Largo Volunteer Ambulance Corps and Ocean Reef Public Safety, are required to have state-approved trauma transport protocols that enable them to effectively evaluate whether a patient has suffered injuries serious enough to require treatment at a trauma center versus the emergency room of the community hospital. None of them, except Key Largo Volunteer Ambulance Corps (KLVAC), continues to rely on the presence of a "trauma officer" on the scene. In fact, no where else in the state relies on the response of such an individual to an emergency scene to arrange air transport service. Coordination of the arrival of air transport services is one of the many responsibilities of what we in the emergency services call the "incident commander". Incident commanders are responsible to build an incident command structure that assigns responsibility for either geographic or functional activities on an emergency scene, based on the complexity of the incident and the resources they command. If an accident scene is complex enough, specific functional areas may be assigned to various responders as they arrive, including such components as triage, treatment, transportation coordination and patient disposition.

The assertion that the UKHCTD director's presence is essential to relaying critical patient information to the trauma center is inaccurate. There is no doubt that this relay of information is very important, however both ground ambulances and air ambulances have the capability of either radio or telephone contact with the trauma center. It is common practice for the paramedics who are inbound to a trauma center to make such contact, providing both patient information and estimated time of arrival, so that the trauma center can make appropriate preparations.

Most areas of the United States rely on the dispatch center to acquire air transport service, either at the direction of the incident commander or from predetermined "call-down" lists provided to the dispatch center. Indeed, this is the practice of the entire county west of Key Largo. I have high confidence in the field incident commanders, the paramedics in charge, and the Monroe County Sheriff's Office Central Dispatch telecommunicators' ability to act promptly to secure needed aeromedical service.

At last count, the Key Largo Volunteer Ambulance Corps reported 24 active members and the Key Largo Volunteer Fire Rescue Department reported 42 active members. Given these numbers, I would be surprised and quite disappointed if the chiefs of those two organizations were unable to make provisions that essential components of the incident command system are staffed so that successful mitigation of an emergency or rapid patient transport to an appropriate medical facility does not hinge on the arrival of any single individual. I rely on those chiefs to alert me to any additional staffing or training needs required for their organizations' delivery of critical emergency services in the Key Largo area. If the emergency services of the Key Largo area are hamstrung without the presence of a specific, civilian county employee, then we do indeed have much to worry about. I am confident that is not the case.

Sincerely,

A handwritten signature in black ink, appearing to read "Clark O. Martin, Jr.", written in a cursive style.

Clark O. Martin, Jr.
Fire Chief